

## Report Period # 2

District (if applicable)

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## CAMPAIGN EXPENSES

Report Period # 2

NEPPAC

Name (print)

Office (if applicable)

District (if applicable)

## Expenses in Excess of \$100

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
US POST OFFICE	A	9/11/2	\$222.00
SECRETARY OF STATE	A	10/14/2	\$275.00

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